

## **DEPARTMENT REPORT DECEMBER, 2014**

### **DIRECTOR'S OFFICE**

- The Health Director will again coordinate state legislative activities for the Department and the Mayor's Office. The Mayor's Office Legislative Review Team meets weekly during the legislative session. The Team held their initial meeting on December 18<sup>th</sup>. The 2015 Legislative Session begins on January 7, 2015.
- The Health Director and Friends of Public Health are also preparing for the upcoming legislative session. They also met with Lt. Governor Elect Mike Foley, Nebraska Hospital Association & Nebraska Medical Association, regarding public health issues.
- The Health Director met with the University of Nebraska Medical Center – College of Public Health on workforce development. She also provided a presentation to a Masters Public Health class at UNMC and an undergraduate class at Creighton University on Public Health Policy. Masters in Public Health students will do some formal work at our Department.
- The Health Director participated in the news conference for the New Health 360 Clinic on December 18, 2014. Health Department staff will be collocated for this initiative.
- Employee of the Month – Barbette Hall – Information & Fiscal Management.

### **ANIMAL CONTROL**

#### Animal Control Stats

	<b>Sep 12- Nov 12</b>	<b>Sep 13- Nov 13</b>	<b>Sep 14- Nov 14</b>
<b>Pet Licenses Sold</b>	14978	15119	14780
<b>Cases Dispatched</b>	5890	4160	6088
<b>Investigation</b>	6294	6592	6602
<b>Animals Impounded</b>			
<b>Dogs</b>	399	419	389
<b>Cats</b>	328	398	376
<b>Court Citations Issued</b>	102	112	76
<b>Warnings/Defects Issued</b>	3493	4493	4087

Department Report – December, 2014

<b>Bite Cases Reported</b>	144	112	137
<b>Attack Cases Reported</b>	16	9	16
<b>Dogs Declared Pot. Dangerous</b>	21	20	19
<b>Dangerous Dogs</b>	3	4	7
<b>Animal Neglect Investigations</b>	142	119	146
<b>Injured Animal Rescue</b>	184	193	213
<b>Wildlife Removal</b>	123	91	117
<b>Dead Animal Pickup</b>	556	479	559
<b>Lost and Found Reports</b>	676	557	624
<b>Phone Calls</b>	12610	11092	11274
<b>Average Response Time (in mins)</b>	18	21	15

- Staff continue to make progress on documenting work flow for many of our primary jobs. These include Licensing, Bite and Attack Reports, Sanitation Calls, Noise/Barking Dog Calls, Dangerous Dog and Potentially Dangerous Dog Declarations, Neglect and Cruelty Investigations, Stray and At Large Calls and Injured Animals.
- The Animal Control Advisory Committee will meet in January. We will invite a representative from the Lancaster County Sheriff's Office (LSO) to serve on the Committee. There are cases that occur now that will require collaboration with LSO. These may include pet owners that have lived in the city limits and moved out to the county and own a dangerous dog. We also collaborate on bites to assist each other investigations including communicable disease investigation when needed.
- Staff are working on Animal Emergency Management plans, trainings and an exercise. This activity has included close collaboration with the Capital Humane Society. Staff will complete Incident Command Systems training in January. A city/county exercise is being planned for February and Animal Control, along with the Capital Humane Society, will participate in the exercise. Upon completion of the training and the exercise, our local Animal Emergency Management Plan will be updated to include newly established communication channels, key players, timelines for first response and defined duties and tasks for different time intervals.
- Animal Control staff are reviewing and "cleaning up" policies that are outdated and no longer apply. Some of the internal policies are addressed by the City Human Resources Department and don't need to be duplicated in Animal Control. Other policies are more procedural in nature and should be written as procedures and included in new employee orientations and as reminders for employees on how to perform a job when there is a question of procedure.

- Staff will be working with **10 Health** starting this month to create new messages to encourage pet owners to vaccinate and license their dogs and cats. It will be important to use creative outlets for reaching some of the first time pet owners and young pet owners that might not think about the benefits of licensing and the importance of rabies vaccinations.

## COMMUNITY HEALTH SERVICES

### STI Branding Campaign

This month, key CHS staff members who work to identify, treat, and prevent sexually transmitted infections (STI) and reinfections, met with a consultant, Clover Fredrick, to discuss current marketing strategies and recommend new messages and tactics to increase visits to our STI Clinic and webpage. Many thanks to following staff who participated: Amber Woods, Amy Marshall, Anita King, Ann Bussey, Ashley Johnson, Barb Martinez, Bernice Afuh, Charlie Richards, Jazzlyn Green, Jeff Krotz, Jennifer Lantz, Nichol White & Thurman Hoskins.

#### Themes & Target Audiences (In Lincoln and surrounding counties):

- All clients are concerned about stigma surrounding sex and gender and want health services that are private and non-judgmental in which they are treated with dignity and respect for their choices.
- We work with young clients (ages 12-24) who are beginning to make decisions about sex.
- We work with low-income clients who may not have other options for diagnosis, treatment & education.

#### Measurable Objectives:

- Increase visits to STI Clinic webpage by 25%.
- Reduce bounce rate from webpage to 50%.
- Increase STI clinic visits per week by 25%.
- Increase payment of invoices by 25%.

#### Finalization of Tagline:

Three tagline suggestions were developed.

1. No Judgment. Just Answers.
2. Answers you need. Respect you deserve.
3. **CARE** Clinic: **C**onfidential **A**nswers. **R**espect for **E**veryone.
- 4.

Tagline # 2 received the most votes amongst staff: *Answers you need. Respect you deser*

## DENTAL HEALTH & NUTRITION

### WIC

#### Caseload (Participation)

<b>Total</b>	3620
<b>Main</b>	2780
<b>LMEP</b>	Closed
<b>Cornhusker Clinic</b>	840

#### Food: For July 2014 -

<b>Food Monthly Obligations</b>	\$ 247,909.46
<b>Food Pkg Avg.</b>	\$ 68.29
<b>Women</b>	\$ 43.86
<b>Infants</b>	\$ 139.49
<b>Children</b>	\$ 47.94

#### Mentoring:

	(Number and school)
<b>Students</b>	9 UNMC RN students
<b>Interns</b>	
<b>Volunteers</b>	
<b>LMEP Residents</b>	2

#### Dental Health

- Number of clients seen (unduplicated count): 449
- Number of clients seen (duplicated count): 512
- Number of client visits (duplicated provider appointments): 737
- Number of children seen: 251 (56%)
- Number of clients enrolled in Medicaid: 268 (60%)
- Number of clients enrolled in General Assistance: 13 clients for 15 patient visits. General Assistance is reimbursing LLCHD \$30/patient visit.
- Number of Nebraska Urban Indian Health Coalition (NUIHC) clients referred/seen: 7 (3 Medicaid, 4 uninsured). NUIHC is reimbursing LLCHD \$30/patient visits for the uninsured clients.
- Number of racial, ethnic, and White Non-English speaking clients: 297 (66%)

#### Community Outreach Activities

- LLCHD dental staff provided elementary school based screenings at Eastridge (68), Elliott (227), Norwood Park (67), and Everett (291) for a total of 653 children. Children

targeted through the school based screenings are those children that have not reported seeing a dentist in the past 12 months.

- November 7 and 8, a mini Mission of Mercy was held at the Center for People in Need offering free urgent dental to over 300 patients from the Lincoln area and surrounding communities. Over \$200,000 was provided in dental care to the patients utilizing volunteer local dentists, hygienists, and College of Dentistry dental and dental hygiene students with dental supplies purchased through community donations. Dental staff was involved with the planning committee, set-up and delivery of services during the two day event.

## ENVIRONMENTAL PUBLIC HEALTH

### Child Care Health Consultation Services

LLCHD's Child Care Health Consultation Services protect the health of children, their families and our community by preventing communicable disease outbreaks that originate in child care settings. Many child care centers lack adequate health and safety practices, especially those sites that serve low income or racial/ethnic minority families. Improving the training of staff, updating policies, and obtaining input from skilled health professionals decreases the incidence of disease and improves health and safety in child care centers. Through implementation of the Child Care Health Consultation Services with the assistance of Nebraska Health Care Funding Act dollars no community-wide outbreaks originating from child care centers occurred during July 1, 2013 – June 30, 2014. In the summer of 2014, multiple cases of Shigellosis were confirmed in one child care center and several cases of Norovirus were identified in an additional center. The LLCHD Child Care Health Consultant worked closely with the child care directors of these "infected" facilities to inform parents and staff of needed health and sanitation protocol during the duration of the illnesses. This proactive and close communication approach resulted in no further outbreaks into the community.

The Lincoln Municipal Code 8.14 requires health and safety training for child care center staff every two years. The two hour training includes health information such as illness prevention and exclusion, diapering, hand washing, and food safety (*683 child care staff attended the Health and Safety Training*). The training is set-up to emulate an actual child care health and safety inspection that is used to regulate the child care facilities. LLCHD's Child Care Health Consultant performs on-site assessments of child care center environments and program operations, in addition to assisting directors in the development and implementation of improvement plans. The Child Care Health and Safety assessment and the Playground Safety assessment were re-designed this year to include classroom observations and



Timer used to track disinfectant contact time on diapering surface or sanitizer on the eating table.  
Need to move diapering closer to changing station and sink needs cleaned.

incorporate the policy and procedures needed by management with classroom evaluations of health and safety practices. References were provided to professional resources (e.g., Caring for Our Children, Environmental Rating Scales for infants and preschoolers, NE DHHS Title 391.3, LMC 8.14) to aid directors in developing best practices in their centers.

Staff continue to use a coaching model to increase the individual's "buy-in" in making behavior changes (*1751 children and 362 staff were reached through consultation*). Unique solutions to health and safety barriers are identified and implemented. Over the past year Sanitize, Disinfect and Cleaning Schedule was



This play structure is not appropriate for this setting. It is designed for home use. Not anchored down. No steps (only vertical ladder) to climb up to the slide. Slide sides are not 4" or more. Tunnel does not have openings to see in. On grass - not a cushioned surface.

the top implemented policy followed by Playground Supervision and Playground Safety, Staff Manual Policies, Parent Manual, Supervision, Safe Sleep, Medicine Administration, Lost/Missing Child, Recycling/Waste Reduction (*153 Recommendations and 166 Voluntary Health Policy Actions were Implemented in Child Care Centers*). Other specialty child care training provided by the Child Care Health Consultant focused on Medication Administration and Health and Safety Train the Trainer (*111 Child Care Staff Attended Specialty Trainings*).

The State of Nebraska updated their Child Care Program licensing requirements in May 2013; this continues to greatly impact the work of the Consultation program. Numerous calls were received from child care centers working

to comply with the new standards and child care staff training requirements. Our Consultant also works closely with the Nebraska Child Care Center Directors Association to educate others on state and local child care regulations

LLCHD's Child Care Health Consultation Services Program identified a need in the child care community for a "Bleach Safety Kit" due to the following list of concerns:

- Confusion on cleaning, sanitizing and disinfecting definitions and usage.
- Multiple chemicals being used and stored.
- Inconsistent and overuse of chlorine.
- Unmarked bottles of chemicals.
- A change in the concentration of sodium hypochlorite in bleach products.
- Chemical exposure to children and staff. (e.g. Toddler teachers change 24 diapers a day on average with exposure to chemical disinfectant each time. In addition, the majority of teachers are female and of childbearing age.)



The LLCHD Child Care Health Consultant (CCHC) worked with Metro Health in Oregon to adapt bleach safety materials for use in Lancaster County. The “Bleach Safety Kits” include color coded labels that outline the concentrations for sanitizing and disinfecting with the new 8.25% concentrated bleach and pumps designed to screw onto standard bleach bottles. Color coded labels were designed for the spray bottles in addition to hangtags and posters providing directions for use. Reusable gloves were included in the kits to promote safe handling of chemicals. Fifty-two child care centers have received “Bleach Safety Kits” along with on-site training. Directors have reported that staff have been excited about the bleach pumps and how easy they are to use. Facilities are not using as much bleach due to the correct amount being dispensed-leading to safer chemical usage around our most vulnerable citizens.



Another unforeseen result of the “Bleach Safety Kit” has been a large increase in communication between the CCHC and the center directors. Many of our high risk facilities have not reached out to LLCHD in the past for guidance. However after onsite Bleach Safety training, many of these directors have increased their contact with the CCHC to report illnesses or ask questions on other health and safety topics. We feel the Bleach Safety Kit has increased health and safety in our child care environments!

## HEALTH DATA & EVALUATION

- As reported last month, the number of cases of pertussis (whooping cough) have increased this fall and we have surpassed our previous high (88 in 2005) since the number of cases has now passed 110. The communicable disease staff has been busy consulting with schools and medical providers to discuss the best means to control the outbreak.
- As expected, the incidence of pertussis is high among those who are not current with the recommended vaccinations, which is estimated to increase their odds of contracting pertussis by a factor of four; but more surprisingly, the number of cases of pertussis for teens and adolescents who are current with the recommended number of pertussis vaccine doses (five doses as children with a booster as a teen) is also relatively high. Apparently, either those individuals did not develop immunity against pertussis or their level of immunity has waned over time. Still, it is believed that those who are current with their vaccinations may have less severe cases than those who are not current with their doses.
- Whooping cough can lead to severe complications in infants less than six so it is important that those people around infants under six months be immunized to protect

them from getting the disease. For adolescents over the age of 11 and adults (especially parents and caregivers), that means they should receive a single booster against pertussis known as TDap; and pregnant women should receive a booster in the third trimester of each pregnancy as it helps pass some protection to the fetus.

- Flu activity has increased significantly over the last couple of weeks even though we have not seen a dramatic increase in student absences as yet. With school being out for the holiday, we anticipate the absences will be up in January as flu will likely spread in the community and may also be brought back by travelers from destinations with even higher levels of flu activity. Also, this year's vaccine is not well matched with the type of flu that is dominant (H3N2) so even those who have been vaccinated may come down with a case of the flu. Still, it's recommended that everyone 6 months and older seek the vaccine as it will take two weeks for the immunity to take effect. Anyone who has a high risk from complications if they catch the flu (the elderly, children under 5, pregnant women, persons with a chronic health condition) even though they have been vaccinated should see their medical provider and possibly be treated with an antiviral.
- Our public Health Epidemiologist, Raju Kakarlapudi, has been working with the indicators for the Mayor's dashboard, which have been recently updated to reflect the most current data. In addition, Raju has been utilizing the 2013 BRFSS survey results to estimate any differences by census tract. Even where there are differences in estimates from one tract to another, that doesn't mean that there is a statistically significant difference among the tracts. Still, the estimates do pinpoint geographic areas that are slightly higher or lower than other areas in the community.

## **HEALTH PROMOTION & OUTREACH**

### **Chronic Disease Prevention and Minority Health**

- Lincoln was selected by the National League of Cities as one of seven cities to be part of a learning collaborative regarding health disparities including childhood obesity-related health disparities. Other cities include Baton Rouge, Louisiana; Cleveland, Ohio; Kansas City, Kansas; Oklahoma City, Oklahoma; Savannah, Georgia; and Virginia Beach, Virginia. This Learning Collaborative on Health Disparities will engage the seven pilot cities, their local elected officials, staff and community partners in a process to deepen their understanding of childhood obesity-related health disparities and the underlying causes of these disparities. The National League of Cities has engaged an advisory panel to provide expert technical assistance to the cities as they address these health issues. Monthly group conference calls will allow conversation among the city representatives of how the health issues are being identified and addressed in each city. The expert panel will be available to provide insight and guidance on specific questions and action plans. Staff will provide leadership and support to the City team.

- Staff are uniting the 54321 GO message and the Let's Move Cities, Towns, and Counties initiative into a social media campaign, Let's Move Lincoln! This campaign will include bi-weekly challenges to the community, with emphasis on young children, to increase physical activity and healthy eating. Anna Wishart, the Mayor's spokesperson for Let's Move Cities, Towns, and Counties, is the featured adult in the video challenges. These challenges will be on social media in early January, and will be promoted through our community partners, printed materials, and Channel 10 Health.

### **Tobacco Prevention**

- Staff continue to promote the smoke-free housing registry. At this time, there are 3,169 units in 279 buildings that are listed on the smoke-free housing registry.

### **Injury Prevention**

- Staff conducted a child passenger safety seat event at Anderson Ford south. Sixteen seats were checked. Volunteer technicians typically spend 45 minutes with each car seat installation checking the seat for safety and educating the parents/guardians on proper installation and use. For an event of this size, 6 to 8 technicians are required to accommodate the installations within the time allotted.

### **Media**

- Staff appeared on Channel 8 Midday Forum to discuss staying physically active during the winter months and avoid "Hibernating Your Heart."
- Staff were featured in a 54321Go interview segment on the Channel 10 Health Shape of Our City program.

## **INFORMATION & FISCAL MANAGEMENT**

- Revenue and Cash Handling Policy has been completed and in the approval process. This is a comprehensive policy which covers all revenue from all sources throughout the Department. It delineates appropriate cash handling practices. Cash handling practices reflect the need to maintain good customer service and protect assets.
- New requirements for federal grants go into effect at the end of December. City and County Finance Directors are considering training for all staff who are responsible for managing grants. IFM Fiscal staff will participate in the training when it is available. IFM Manager will be assisting the Director to monitor new grants in light of the new rules and provide feedback on whether it is cost effective in light of the new requirements.

Department Report – December, 2014